

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

**1 ACCOUNT #**  
(Ethics Commission Filers)

**2 Total pages filed:**

23

**3 CANDIDATE /  
OFFICEHOLDER  
NAME**

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

OSCAR

LEESER

**4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS**

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1017 QUINTA ANTIGUA  
EL PASO, TEXAS

79912

☐ change of address

**5 CANDIDATE/  
OFFICEHOLDER  
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(915)

373-1234

**6 CAMPAIGN  
TREASURER  
NAME**

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

CHRISTINA

ACOSTA

**7 CAMPAIGN  
TREASURER  
ADDRESS  
(residence or business)**

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

9327 ELGIN

EL PASO

TEXAS

79907

**8 CAMPAIGN  
TREASURER  
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(915)

433-1647

**9 REPORT TYPE**
☐ January 15

☒ 30th day before election

☐ Runoff

☐ 15th day after campaign  
treasurer appointment  
(officeholder only)

☐ July 15

☐ 8th day before election

☐ Exceeded \$500  
limit

☐ Final report (Attach C/OH - FR)

**10 PERIOD  
COVERED**

Month Day Year

3 / 1 / 2013

THROUGH

Month Day Year

4 / 1 / 2013

**11 ELECTION**

Month Day Year

5 / 11 / 2013

ELECTION TYPE

☐ Primary

☐ Runoff

☒ General

☐ Special

**12 OFFICE**

OFFICE HELD (if any)

**13 OFFICE SOUGHT (if known)**

MAYOR

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

OSCAR LEESER

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pagesCITY CLERK DEPT.  
2013 APR 10 PM 5:4417 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

84,009.25

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

0

4. TOTAL POLITICAL EXPENDITURES

\$

74,031.61

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

6,593.39

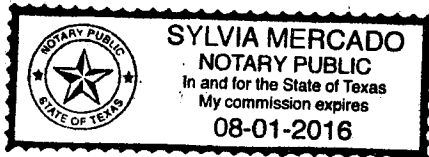
OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

50,000

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

Oscar Leeser sm

Sworn to and subscribed before me, by the said

10<sup>th</sup>

day of

April

20

13

, this the

, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Sylvia Mercado

Printed name of officer administering oath

notary public

Title of officer administering oath

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

2013 APR 10 PM 5:16

The Instruction Guide explains how to complete this form.

Total Pages Schedule A:

15

<b>2 FILER NAME</b> OSCAR LEESER		<b>3 ACCOUNT #</b> (Ethics Commission Filers)	
<b>4 Date</b> 3/1/2013	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: JOE C. PICKETT	<b>7 Amount of contribution (\$)</b> \$1,000	<b>8 In-kind contribution description (if applicable)</b>
<b>6 Contributor address; City; State; Zip Code</b> 3606 WOOSTER LN. EL PASO, TX 79963		(If travel outside of Texas, complete Schedule T)	
<b>9 Principal occupation / Job title (See Instructions)</b>		<b>10 Employer (See Instructions)</b>	
<b>Date</b> 3/5/2013	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: ETTA MAE SCHERR	<b>Amount of contribution (\$)</b> \$500	<b>In-kind contribution description (if applicable)</b>
<b>Contributor address; City; State; Zip Code</b> 744 GOMEZ RD. EL PASO, TX 79932		(If travel outside of Texas, complete Schedule T)	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b> 3/6/2013	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: GEORGE SALOM JR.	<b>Amount of contribution (\$)</b> \$1,000	<b>In-kind contribution description (if applicable)</b>
<b>Contributor address; City; State; Zip Code</b> 807 S. EL PASO ST. EL PASO, TX 79901		(If travel outside of Texas, complete Schedule T)	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b> 3/6/2013	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: HARRY A. GARBAR	<b>Amount of contribution (\$)</b> \$2,500	<b>In-kind contribution description (if applicable)</b>
<b>Contributor address; City; State; Zip Code</b> 4241 PARK HILL DR. EL PASO, TX 79902		(If travel outside of Texas, complete Schedule T)	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b> 3/7/2013	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: ED SOTO	<b>Amount of contribution (\$)</b> \$2,500	<b>In-kind contribution description (if applicable)</b>
<b>Contributor address; City; State; Zip Code</b> 515 S. KANSAS ST. EL PASO, TX 79901		(If travel outside of Texas, complete Schedule T)	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

SCHEDULE A

2013 APR 10 PM 5:44

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/7/2013

5 Full name of contributor

☐ out-of-state PAC (ID#)

LUIS HERNANDEZ

7 Amount of contribution (\$)

\$1,000

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

6 Contributor address; City; State; Zip Code

321 ALICIA DR.  
EL PASO, TX 79905

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/7/2013

Full name of contributor

☐ out-of-state PAC (ID#)

THAD STEELE JR.

Amount of contribution (\$)

\$1,000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

1004 STAR RIDGE PL.  
EL PASO, TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/7/2013

Full name of contributor

☐ out-of-state PAC (ID#)

GEORGE ELIAS SALOM JR.

Amount of contribution (\$)

\$1,000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

510 BLACKER AVE  
EL PASO, TX 79902

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/7/2013

Full name of contributor

☐ out-of-state PAC (ID#)

ADAM Z. FRANK

Amount of contribution (\$)

\$1,000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

801 RIVER OAKS DR.  
EL PASO, TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/7/2013

Full name of contributor

☐ out-of-state PAC (ID#)

GERALD RUBIN

Amount of contribution (\$)

\$5,000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

538 LAUREL CANYON  
EL PASO, TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

2013 APR 10 PM 5:44

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/7/2013

5 Full name of contributor

☐ out-of-state PAC (ID#)

GEORGE ELIAS SALOM

6 Contributor address; City; State; Zip Code

807 S. EL PASO ST.  
EL PASO, TX 79901

7 Amount of contribution (\$)

\$250

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/7/2013

Full name of contributor

☐ out-of-state PAC (ID#)

WENDY SALOM

Contributor address; City; State; Zip Code

510 BLACKER AVE.  
EL PASO, TX 79902

Amount of contribution (\$)

\$500

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/7/2013

Full name of contributor

☐ out-of-state PAC (ID#)

JOSEPH SOTO

Contributor address; City; State; Zip Code

8900 VISCOUNT BLVD STE A2  
EL PASO, TX 79925

Amount of contribution (\$)

\$1,000

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/7/2013

Full name of contributor

☐ out-of-state PAC (ID#)

MARK D. ZIMMERMAN

Contributor address; City; State; Zip Code

408 BLACKER AVE.  
EL PASO, TX 79902

Amount of contribution (\$)

\$1,000

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/8/2013

Full name of contributor

☐ out-of-state PAC (ID#)

EUGENE C. CARREJO

Contributor address; City; State; Zip Code

1016 CALLE PARQUE  
EL PASO, TX 79912

Amount of contribution (\$)

\$500

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

2013 APR 10 PM 5:44

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/11/2013

5 Full name of contributor

☐ out-of-state PAC (ID#)

ROBERT POTAMKIN

7 Amount of contribution (\$)

\$5,000

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

6 Contributor address; City; State; Zip Code

7714 FISHER ISLAND DRIVE  
MIAMI, FLORIDA 33109

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/11/2013

Full name of contributor

☐ out-of-state PAC (ID#)

JIM GORE

Amount of contribution (\$)

\$1,000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

5444 CACTUS HILL  
EL PASO, TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/2013

Full name of contributor

☐ out-of-state PAC (ID#)

WILLIAM M. STEELE

Amount of contribution (\$)

\$100.<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

6598 EAGLE RIDGE DR.  
EL PASO, TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/2013

Full name of contributor

☐ out-of-state PAC (ID#)

TROY L. WYATT

Amount of contribution (\$)

\$100.<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

5706 MIRA GRANDE DR.  
EL PASO, TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/2013

Full name of contributor

☐ out-of-state PAC (ID#)

JIM CARDWELL

Amount of contribution (\$)

\$2,500

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

5772 DIAMOND POINT CIR.  
EL PASO, TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

2013 APR 10 PM 5:44

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/12/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BARBARA J. TERAN	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4900 OLMOS ST. EL PASO, TX 79922		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LOUIS M. ALPERN	Amount of contribution (\$) \$5,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4171 N. MESA BLDG. D, STE 100 EL PASO, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LAURA K. ALPERN	Amount of contribution (\$) \$5,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4171 N. MESA BLDG. D, STE 100 EL PASO, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ALAN H. POTAMKIN	Amount of contribution (\$) \$5,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1 CASUARINA CONCOURSE CORAL GABLES, FL 33143		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BARRY FRIEDER	Amount of contribution (\$) \$1,500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10628 ZURICH STREET COOPER CITY, FL 33026		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT. **SCHEDULE A**

2013 APR 10 PM 5:45

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/13/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: STEVE FOX	7 Amount of contribution (\$) \$2,000	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1122 AIRWAY BLVD. EL PASO, TX 79925		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: KIMBERLY ISAAC SMITH	Amount of contribution (\$) \$400. <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 405 SHARONDALE EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: RHOBERTA LEESER	Amount of contribution (\$) \$100. <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7465 PLAZA TAURINA EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ROBERT L. BOWLING	Amount of contribution (\$) \$5,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4655 COHEN AVE. EL PASO, TX 79924		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/14/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: WHITNEY A. RODRIGUEZ	Amount of contribution (\$) \$100. <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 12693 TIERRA ZULEMA EL PASO, TX 79938		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

2013 APR 10 PM 5:45

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/14/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RUBEN G. SCHAEFFER</b>	7 Amount of contribution (\$) <b>\$100.<sup>00</sup></b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>6462 LA POSTA DR. EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

Date <b>3/14/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>TARA LEE MONTAGNINO</b>	Amount of contribution (\$) <b>\$150.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>5765 LAWDALE DR. NO. B EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date <b>3/14/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>BRUCE G. VANDERVORT</b>	Amount of contribution (\$) <b>\$1,000</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>7313 BRAYS LANDING EL PASO, TX 79911</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date <b>3/16/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LOREN H. HODGES</b>	Amount of contribution (\$) <b>\$1,000</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>401 VALPLANO EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date <b>3/16/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RICHARD DUSTY HENSON</b>	Amount of contribution (\$) <b>\$500.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>808 DON QUIXOTE CT. EL PASO, TX 79922</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

2013 APR 10 PM 5:45

**SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/18/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DON LUCIANO	7 Amount of contribution (\$) \$2,500	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 718 BLACKER EL PASO, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MICHAEL J. JAFFEE	Amount of contribution (\$) \$1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7601 NORTH LOOP EL PASO, TX 79915		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: IDA H. FANNIN	Amount of contribution (\$) \$100. <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11204 SAND CASTLE CT. EL PASO, TX 79936		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DONALD C. LUCIANO	Amount of contribution (\$) \$250. <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 718 BLACKER EL PASO, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: J.C. CURREY	Amount of contribution (\$) \$250. <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 200 S. ALTO MESA DR. EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

2013 APR 10 PM 5:45

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/20/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SHARI SCHWARTZ 6 Contributor address; City; State; Zip Code 1025 SINGING HILLS EL PASO, TX 79912	7 Amount of contribution (\$) \$100. <sup>00</sup>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
10 Employer (See Instructions)			
Date 3/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: YVONNE E. STEVENS Contributor address; City; State; Zip Code 945 VIA MONTE ST. EL PASO, TX 79912	Amount of contribution (\$) \$200. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 3/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DWAYNE ABOUD Contributor address; City; State; Zip Code 154 N. FESTIVAL VILLA G EL PASO, TX 79912	Amount of contribution (\$) \$500. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 3/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ROBERT E. HERMAN Contributor address; City; State; Zip Code 528 THUNDER CREST LN. EL PASO, TX 79912	Amount of contribution (\$) \$3,000	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 3/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ROBYN M. SMITH Contributor address; City; State; Zip Code 1338 DESERT CANYON DR. EL PASO, TX 79912	Amount of contribution (\$) \$200. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

2013 APR 10 PM 5:45

**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/20/2013

5 Full name of contributor

SUSAN M. DAW

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

\$100.<sup>00</sup>

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

 6 Contributor address; City; State; Zip Code  
 4790 SOL DE ALMA WAY  
 EL PASO, TX 79922

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/20/2013

Full name of contributor

LAILAH LEESER

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$100.<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

 Contributor address; City; State; Zip Code  
 7017 IMPERIAL RIDGE DR.  
 EL PASO, TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/2013

Full name of contributor

LEE ZIMMERMAN

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$100.<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

 Contributor address; City; State; Zip Code  
 232 CROWN POINT DR.  
 EL PASO, TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/2013

Full name of contributor

CASSIE J. HOLMAN

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$700.<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

 Contributor address; City; State; Zip Code  
 250 S. STAGE COACH TRL. APT. 827  
 SAN MARCOS, TX 78666

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/2013

Full name of contributor

M. DEAN BALMER

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$1,000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

 Contributor address; City; State; Zip Code  
 1111 LOS JARDINES CIR.  
 EL PASO, TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

2013 APR 10 PM 5:45

**SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/20/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ANDREW AVILA</b>	7 Amount of contribution (\$) <b>\$ 250.<sup>00</sup></b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>6365 LOS ROBLES DR. EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

Date <b>3/20/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>SANDY HUGHES</b>	Amount of contribution (\$) <b>\$ 200.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>4785 TURTLE DOVE EL PASO, TX 79922</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date <b>3/20/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JAY ZIMMERMAN</b>	Amount of contribution (\$) <b>\$ 250.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>729 VILLA ANTIGUA EL PASO, TX 79932</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date <b>3/20/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>KENDALL E. MILLIKEN SR.</b>	Amount of contribution (\$) <b>\$ 250.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>5952 LOS PUEBLOS DR. EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date <b>3/20/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LILIA B. ALVAREZ</b>	Amount of contribution (\$) <b>\$ 200.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>6336 EDGEMERE BLVD. EL PASO, TX 79925</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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CITY CLERK DEPT.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

2013 APR 10 PM 5:45

**SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/20/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>SUSAN DREWRY</b>	7 Amount of contribution (\$) <b>\$100.<sup>00</sup></b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>P.O. BOX 220144 EL PASO, TX 79913</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>3/20/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>DAWN DUNCAN</b>	Amount of contribution (\$) <b>\$250.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>604 MEADOW WILLOW DR. EL PASO, TX 79922</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/20/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>EDWARD E. MCCORMICK</b>	Amount of contribution (\$) <b>\$100.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>327 CORAL SKY LN. EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/20/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>GEORGE LEESER</b>	Amount of contribution (\$) <b>\$100.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>300 W. RIO GRANDE AVE. APT 7 EL PASO, TX 79902</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/20/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>J. STANLEY SANTOS</b>	Amount of contribution (\$) <b>\$500.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>10974 GARY PLAYER DR. EL PASO, TX 79935</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT. **SCHEDULE A**  
2013 APR 10 PM 5:45

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/21/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JOSE G. SANTOS JR.</b>	7 Amount of contribution (\$) <b>\$1,500</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>5400 ALAMEDA EL PASO, TX 79905</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>3/22/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>CLIFF EISENBERG</b>	Amount of contribution (\$) <b>\$500.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1201 E. YANDELL EL PASO, TX 79902</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/22/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RICHARD T. ELLIOTT</b>	Amount of contribution (\$) <b>\$500.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>10904 DAVE MARR CT. EL PASO, TX 79935</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/24/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ANGELA SANTOS COY</b>	Amount of contribution (\$) <b>\$2,000</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>900 VIA PENASCO EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/26/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>DAVID AMAYA</b>	Amount of contribution (\$) <b>\$1,500</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>13021 HORIZON BLVD. HORIZON CITY, TX 79928</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.  
2013 APR 10 PM 5:45**SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/13/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: STUART I. MEYERS 6 Contributor address; City; State; Zip Code 2100 HOLLYWOOD BLVD HOLLYWOOD, FL. 33020	7 Amount of contribution (\$) \$5,000	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
10 Employer (See Instructions)			
Date 3/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ROBERT E. HERMAN Contributor address; City; State; Zip Code 528 THUNDER CREST LN. EL PASO, TX 79912	Amount of contribution (\$) \$2,000	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 3/1/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: OSCAR LEESER Contributor address; City; State; Zip Code 1017 QUINTA ANTIGUA EL PASO, TX 79912	Amount of contribution (\$) \$500. <sup>00</sup>	In-kind contribution description (if applicable) IN-KIND (FILING FEE FOR MAYOR)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 3/1/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: OSCAR LEESER Contributor address; City; State; Zip Code 1017 QUINTA ANTIGUA EL PASO, TX 79912	Amount of contribution (\$) \$800. <sup>00</sup>	In-kind contribution description (if applicable) IN-KIND (RENT)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 3/14/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: WILLIAM SMITH Contributor address; City; State; Zip Code 405 SHARON DALE EL PASO, TX 79912	Amount of contribution (\$) \$134.25	In-kind contribution description (if applicable) IN-KIND (FOOD FOR FUNDRAISER)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

2013 APR 10 PM 5:45

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/28/2013

5 Full name of contributor

☐ out-of-state PAC (ID#:

BILL MEANS

6 Contributor address; City; State; Zip Code

2525 N. MESA ST.  
EL PASO, TX 799027 Amount of  
contribution (\$)\$650.<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution  
description (if applicable)IN-KIND  
(FOOD FOR  
FUNDRAISER)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/28/2013

Full name of contributor

☐ out-of-state PAC (ID#:

MARY DESLONG CHAMPS

Contributor address; City; State; Zip Code

1845 NORTHWESTERN DR.  
EL PASO, TX 79912Amount of  
contribution (\$)\$650.<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

In-kind contribution  
description (if applicable)IN-KIND  
(FOOD FOR  
FUNDRAISER)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/28/2013

Full name of contributor

☐ out-of-state PAC (ID#:

SHARON ROBINET

Contributor address; City; State; Zip Code

1075 ESPLANADA CIR.  
EL PASO, TX 79932Amount of  
contribution (\$)\$650.<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

In-kind contribution  
description (if applicable)IN-KIND  
(FOOD FOR  
FUNDRAISER)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

Amount of  
contribution (\$)In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

Amount of  
contribution (\$)In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**LOANS**

CITY CLERK DEPT.

**SCHEDULE E**

2013 APR 10 PM 5:45

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <b>1</b>	
2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS:   ⇒   ⇒   ⇒   ⇒   ⇒   ⇒		\$ <b>50,000</b>	
5 Date of loan <b>3-7-2013</b>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) <b>OSCAR LEESER</b>	9 Loan Amount (\$) <b>\$50,000</b>	
6 Is lender a financial Institution? <b>Y (N)</b>	8 Lender address; City; State; Zip Code <b>7101 N. MESA ST. #374 EL PASO, TX 79912</b>	10 Interest rate <b>—</b>	
		11 Maturity date <b>—</b>	
12 Principal occupation / Job title (See Instructions) <b>BUSINESS OWNER</b>		13 Employer (See Instructions) <b>EL PASO HYUNDAI</b>	
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor  18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	Loan Amount (\$)	
Is lender a financial Institution? <b>Y    N</b>	Lender address; City; State; Zip Code	Interest rate	
		Maturity date	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account <input type="checkbox"/>	
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor  Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)	
Principal Occupation (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense      Gift/Awards/Memorials Expense      Salaries/Wages/Contract Labor      Loan Repayment/Reimbursement  
 Accounting/Banking      Legal Services      Solicitation/Fundraising Expense      Transportation Equipment & Related Expense  
 Consulting Expense      Food/Beverage Expense      Travel In District      Contributions/Donations Made By  
 Event Expense      Polling Expense      Travel Out Of District      Candidate/Officeholder/Political Committee  
 Fees      Printing Expense      Office Overhead/Rental Expense      OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>5</b>		2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/12/2013</b>		5 Payee name <b>CRICKET COMMUNICATIONS</b>			
6 Amount (\$) <b>\$101.92</b>		7 Payee address; City; State; Zip Code <b>9801 GATEWAY W. BLVD. EL PASO, TX 79925</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>OTHER</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>CAMPAIGN CELL PHONE</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
Date <b>3/19/2013</b>		Payee name <b>MARTINA VALVERDE</b>			
Amount (\$) <b>\$202.50</b>		Payee address; City; State; Zip Code <b>9300 VISCOUNT #171 EL PASO, TX 79925</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>OTHER</b>		Description (If travel outside of Texas, complete Schedule T) <b>WEBSITE SERVICES</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
Date <b>3/22/2013</b>		Payee name <b>MOISES BUTANDA</b>			
Amount (\$) <b>\$2,000</b>		Payee address; City; State; Zip Code <b>8600 BRODIE LN. SUITE 937 AUSTIN, TX 78745</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>CONSULTING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
Date <b>3/22/2013</b>		Payee name <b>RMED SPORTING GOODS</b>			
Amount (\$) <b>\$2,491.04</b>		Payee address; City; State; Zip Code <b>1501 WYOMING AVE. EL PASO, TX 79902</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>PRINTING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T) <b>CAMPAIGN SHIRTS</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	

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**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

2013 APR 10 PM 5:45

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 3/22/2013	5 Payee name RESULTS VIDEO, INC.
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6 Amount/(\$) \$1,450.00	7 Payee address; City; State; Zip Code 4585 RIPLEY DR. BLDG 2 EL PASO, TX 79922
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description (If travel outside of Texas, complete Schedule T) TV PRODUCTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/22/2013	Payee name KDBC
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Amount (\$) \$3,952.50	Payee address; City; State; Zip Code 801 N. OREGON ST. EL PASO, TX 79902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (If travel outside of Texas, complete Schedule T) MEDIA BUYS
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/22/2013	Payee name KFOX
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Amount (\$) \$10,812.00	Payee address; City; State; Zip Code 6004 N. MESA ST. EL PASO, TX 79912
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (If travel outside of Texas, complete Schedule T) MEDIA BUYS
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/22/2013	Payee name KTSM
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Amount (\$) \$4,998.00	Payee address; City; State; Zip Code 801 N. OREGON ST. EL PASO, TX 79902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (If travel outside of Texas, complete Schedule T) MEDIA BUYS
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

2013 APR 10 PM 5:45

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F:		<b>2</b> FILER NAME OSCAR LEESER		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 3/22/2013		<b>5</b> Payee name KVIA			
<b>6</b> Amount (\$) \$14,174. <sup>00</sup>		<b>7</b> Payee address; City; State; Zip Code 4140 RIO BRAVO ST. EL PASO, TX 79902			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) MEDIA BUYS	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 3/27/2013		Payee name CAMPAIGN GRID			
Amount (\$) \$7,000. <sup>00</sup>		Payee address; City; State; Zip Code 414 COMMERCE DRIVE, SUITE 100 FORT WASHINGTON, PA 19034			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) OTHER		Description (If travel outside of Texas, complete Schedule T) SOCIAL MEDIA DEVELOPMENT	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 3/28/2013		Payee name LEVY AD GROUP			
Amount (\$) \$9,777.05		Payee address; City; State; Zip Code 5905 S. DECATUR BLVD. #1 LAS VEGAS, NV 89118			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 3/28/2013		Payee name ZIPPY PRINTING			
Amount (\$) \$337.74		Payee address; City; State; Zip Code 2855 PERSHING DR. EL PASO, TX 79903			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) PRINTING EXPENSE		Description (If travel outside of Texas, complete Schedule T) PUSH CARDS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

2013 APR 10 PM 5:45

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

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<b>1</b> Total pages Schedule F:		<b>2</b> FILER NAME OSCAR LEESER		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 3/28/2013		<b>5</b> Payee name ZIPPY PRINTING			
<b>6</b> Amount (\$) \$422.18		<b>7</b> Payee address; City; State; Zip Code 2855 PERSHING DR. EL PASO, TX 79903			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) PRINTING EXPENSE		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) PUSH CARDS	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 3/28/2013		Payee name L & J DISTRIBUTORS			
Amount (\$) \$80.00		Payee address; City; State; Zip Code 6956 MARKET ST. EL PASO, TX 79915			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) PRINTING EXPENSE		Description (If travel outside of Texas, complete Schedule T) BANNERS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 3/28/2013		Payee name A & B LABELS AND PRINTING			
Amount (\$) \$768.58		Payee address; City; State; Zip Code 7245 Copper QUEEN EL PASO, TX 79915			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) PRINTING EXPENSE		Description (If travel outside of Texas, complete Schedule T) PUSH CARDS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 3/27/2013		Payee name SCORPION SALES & ENTERTAINMENT			
Amount (\$) \$2,836.25		Payee address; City; State; Zip Code P.O. BOX 12570 EL PASO, TX 79913			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) PRINTING EXPENSE		Description (If travel outside of Texas, complete Schedule T) YARD SIGNS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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**POLITICAL EXPENDITURES****SCHEDULE F**

CITY CLERK DEPT.

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F:		<b>2</b> FILER NAME OSCAR LEESER		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 3/28/2013		<b>5</b> Payee name RMED SPORTING GOODS			
<b>6</b> Amount (\$) \$1,063.56		<b>7</b> Payee address; City; State; Zip Code 1501 WYOMING AVE. EL PASO, TX 79902			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) PRINTING EXPENSE		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) BANNERS	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 3/29/2013		Payee name DIANA RAMIREZ			
Amount (\$) \$2,200.00		Payee address; City; State; Zip Code 3032 MONROE AVE. EL PASO, TX 79930			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) POLLING EXPENSE		Description (If travel outside of Texas, complete Schedule T) POLL WORKER	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 3/28/2013		Payee name CLEAR CHANNEL OUTDOOR			
Amount (\$) \$9,364.29		Payee address; City; State; Zip Code 2305 SPARKMAN ST. EL PASO, TX 79903			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE		Description (If travel outside of Texas, complete Schedule T) BILLBOARDS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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